

Form ChorWor. 3008

<p><i>-Officail Emblem-</i></p> <p>Central Bureau of Weights and Measures</p>	<p>Permission Application Form for removal, depletion or damage of verification or other marks prepared by the Weights and Measures Inspector to seize and confiscate Weighing or Measuring Instruments or packaged commodities</p>	<p>For Official Use Only</p> <p>Application no..... Date received..... Receiver.....</p>
<p style="text-align: center;"><b>Application for Permission</b></p> <p>Attention to.....</p> <p>I hereby request permission for removal, depletion or damage of verification or other marks prepared by the Weights and Measures Inspector to seize and confiscate Weighing or Measuring Instruments or packaged commodities with regard to Weights and Measures Inspector Section 52 (4) of the Weights and Measures B.E. 2560 (2017) with the Amendment as follows:</p>		
<p>1. Applicant name.....</p> <p><input type="checkbox"/> Type of business   <input type="radio"/> Producer   <input type="radio"/> Importer   <input type="radio"/> repairer of Weighing or Measuring Instrument Registration certification of company no.....</p> <p><input type="checkbox"/> Owner or possessor of seized and confiscated Weighing and Measuring Instrument <input type="checkbox"/> Owner or possessor of seized and confiscated packaged commodities</p> <p>Company name..... Address no..... Moo..... Sub-road/Soi..... Road.....Sub-district..... District.....Province.....Post Code..... Tel.....Fax/e-mail.....</p> <p>Authorized person name (if any)..... Identification no.....</p>		
<p>2. Operator Name for removal, depletion or damage of verification or other marks prepared by the Weights and Measures Inspector to seize and confiscate Weighing or Measuring Instruments or packaged commodities..... Identification no..... Tel.....Operation date.....</p>		
<p>3. <input type="checkbox"/> Purpose of Use of seized or confiscated weighing and measuring device..... Type.....Model.....Capacity.....Number of device.....</p> <p><input type="checkbox"/> Purpose of Use of seized or confiscated packed commodities..... Type.....Model.....Capacity.....Number of device.....</p>		
<p>4. Seized or confiscated place..... Address no..... Moo..... Sub-road/Soi..... Road.....Sub-district..... District.....Province.....Post Code..... Tel.....Fax/e-mail.....</p>		
<p>5. Application document <input type="checkbox"/> Copy of ID card of applicant   <input type="checkbox"/> Copy of certificate <input type="checkbox"/> Copy report of Weights and Measures Inspector   <input type="checkbox"/> Authorization Letter</p>		
<p>6. <input type="checkbox"/> I shall proceed with the weighing and measuring device legally and shall coordinate with the Weights and Measures Inspector for required verification prior to use. <input type="checkbox"/> I shall proceed with the packaged commodities legally and shall coordinate with the Weights and Measures Inspector for required verification again.</p>		
<p style="text-align: center;">I hereby certify that the above text is true in all respects.</p> <p style="text-align: center;">Signature..... Owner/authorized person (.....) (Date..... Month.....B.E.....)</p> <p style="text-align: center;">(Company Seal)</p>		
<p style="text-align: center;">Comment of Authorized Personnel</p> <p>..... ..... .....</p> <p style="text-align: center;">...../...../..... Personnel</p>	<p style="text-align: center;">Comment of Authorized Personnel</p> <p><input type="checkbox"/> Approved   <input type="checkbox"/> Not Approved</p> <p>..... .....</p> <p style="text-align: center;">...../...../..... Personnel</p>	